DOCUMENT RESUME

ED 472 927

CG 032 194

AUTHOR	Pelayo, Stephanie L.
TITLE	Forgiveness: Theory, Research, and Clinical Implications for Adolescent Offenders.
PUB DATE	2002-08-00
NOTE	58p.; Doctoral Research Paper, Biola University.
PUB TYPE	Dissertations/Theses (040)
EDRS PRICE	EDRS Price MF01/PC03 Plus Postage.
DESCRIPTORS	*Adolescent Development; Adolescents; *Delinquency; *Psychological Patterns; *Rehabilitation Counseling; Youth Problems
IDENTIFIERS	*Forgiveness

ABSTRACT

This paper reviews the literature on the subject of forgiveness and suggests clinical implications for the treatment of adolescent offenders. Although research has been done in the areas of forgiveness, no studies have been conducted with adolescent offenders. This dearth of information points to a gap in understanding the role of forgiveness in the life of the adolescent. The adolescent developmental process and psychological aspects of the adolescent offender are reviewed and theoretically applied to forgiveness. Being fixated at an adolescent level of development may preclude the psychological insight necessary for individuals to forgive their transgressors, which may need to occur before they can seek forgiveness for their own transgressions. This paper explores the process of forgiveness and potential mediators of forgiveness such as anger, guilt, revenge, locus of control, self-esteem and narcissism, empathy, remorse, commitment, and intrinsic religiosity. Implications for clinical application and suggestions for future research are offered to facilitate growth through engaging in the forgiveness process. (Contains 58 references.) (Author)

Reproductions supplied by EDRS are the best that can be made
from the original document.

CG CGTR 0018

ED 472 927

FORGIVENESS: THEORY, RESEARCH, AND CLINICAL IMPLICATIONS FOR ADOLESCENT OFFENDERS

A Doctoral Research Paper

Presented to

the Faculty of the Rosemead School of Psychology

Biola University

In Partial Fulfillment

of the Requirements for the Degree

Doctor of Psychology

---

by

Stephaie Lau Pelayo

August, 2002

U.S. DEPARTMENT OF EDUCATION
Office of Educational Research and Improvement
EDUCATIONAL RESOURCES INFORMATION CENTER (ERIC)
☐ This document has been reproduced as received from the person or organization originating it.
☐ Minor changes have been made to improve reproduction quality.
• Points of view or opinions stated in this document do not necessarily represent official OERI position or policy.

PERMISSION TO REPRODUCE AND DISSEMINATE THIS MATERIAL HAS BEEN GRANTED BY

S. PELAYO

TO THE EDUCATIONAL RESOURCES INFORMATION CENTER (ERIC)

1

CG032194

BEST COPY AVAILABLE

ABSTRACT

FORGIVENESS: THEORY, RESEARCH, AND
CLINICAL IMPLICATIONS FOR
FOR ADOLESCENT OFFENDERS

by

Stephanie Lau Pelayo

This paper reviews the literature on the subject of forgiveness and suggests clinical implications for the treatment of adolescent offenders. Although research has been done in the area of forgiveness, no studies have been conducted with adolescent offenders. This dearth of information points to a gap in understanding the role of forgiveness in the life of the adolescent. The adolescent developmental process and psychological aspects of the adolescent offender are reviewed and theoretically applied to forgiveness. Being fixated at an adolescent level of development may preclude the psychological insight necessary for individuals to forgive their transgressors, which may need to occur before they can seek forgiveness for their own transgressions. This paper explores the process of forgiveness and potential mediators of forgiveness such as anger, guilt, revenge, locus of control, self-esteem and narcissism, empathy, remorse, commitment, and intrinsic religiosity. Implications for clinical application and suggestions for future research are offered to facilitate growth through engaging in the forgiveness process.

FORGIVENESS: THEORY, RESEARCH, AND

CLINICAL IMPLICATIONS FOR

ADOLESCENT OFFENDERS

by

Stephanie Lau Pelayo

APPROVED:

David M. Cimbora, PhD — Date 6/26/02

Paul L. Poelstra, PhD — Date 6/26/02

APPROVED:

Patricia L. Pike, PhD, Dean

6/26/02

Date

Copyright © 2002 by Stephaie Lau Pelayo

TABLE OF CONTENTS

PAGE

DOCTORAL RESEARCH PAPER

Introduction 1

Adolescent Development 1

The Adolescent Offender 3

Adolescents and Forgiveness From an Object Relations Perspective 6

Methodological Considerations 8

Definitions of Forgiveness 9

Five Stages of Forgiveness 10

Instruments 13

Samples and Procedures 15

Mediators of the Forgiveness Process 15

Anger 17

Guilt 19

Revenge 21

Locus of Control 23

Narcissism 27

Empathy 30

Remorse 33

Commitment 34

Intrinsic Religiosity 36

Summary and Conclusions 38

Clinical Implications 41

PAGE

Suggestions for Future Research 43

REFERENCES 46

FORGIVENESS: THEORY, RESEARCH, AND CLINICAL IMPLICATIONS FOR ADOLESCENT OFFENDERS

Introduction

This study examines theory and research on forgiveness and attempts to conceptually integrate forgiveness concepts within an adolescent development framework. Clinical applications are extracted to assist with understanding where the adolescent offender might be with regard to the forgiveness process. Upon reviewing adolescent development, it becomes clear that adolescents who commit transgressions against others may have been victims themselves. They first need to develop the capacity to forgive others before they will have the capacity to seek forgiveness for their own transgressions. Following a brief review of adolescent development, the probability of arrested development in adolescent offenders and relevant clinical implications for the forgiveness process are suggested.

Adolescent Development

Adolescence is a period of human development that is wrought with turmoil as individuals encounter major physical, mental, and interpersonal transformations. Moving toward independence from the protective shield of childhood, teenagers start relying more on themselves and less on others. Life

may feel relatively unstable to the adolescent as peer relationships become increasingly important and his or her sense of identity begins to solidify. Steiner and Feldman (1996) delineated three phases of adolescence: early adolescence, (from 10 to 13 years of age), mid-adolescence, (from 14 to 17 years of age), and late adolescence, (from 18 to 20 years of age). Developmental changes occur in virtually every domain (pubertal, cognitive, social, sexual, and familial). Physical appearance changes dramatically with rapid growth, weight changes, and the development of secondary sex characteristics. Cognitive changes permit adolescents to think abstractly, to examine previously unquestioned beliefs, to wonder about the future, and to think of themselves as the object of their own thoughts. During this period of adolescent egocentrism, adolescents act as if they are "on stage" and that others are scrutinizing all their actions. Because they think they are the center of attention, adolescents often believe that no one else is capable of understanding what they are going through.

Erikson (1963) purported that the major developmental task of adolescence is to develop an identity and a sense of self that is distinct from others (including parents). Teenagers often adopt roles that are in opposition to authority in order to develop a more solid understanding of their own beliefs and values. In being oppositional, they learn about who they are, gain increased confidence in themselves, and become increasingly aware of their capabilities. Adolescents often use their peer groups to examine their identities and may choose new and different peer groups. Adolescents often conform to peer values when they are unsure how to conduct themselves. Sometimes they choose safe,

nonthreatening relationships in which to practice assertiveness and to develop adaptive problem solving and coping skills. Adolescence is characterized by so many intrapersonal and interpersonal changes that this stage is regarded as full of turmoil, threats, challenges, and opportunities.

The Adolescent Offender

Adolescence can be a traumatic time, and there are moments during which healthy development may become hindered due to various circumstances such as poverty, trauma, and conflict. In addition, inherent personality traits or hormonal influences may render some adolescents less able than others to deal with the challenges of this period of life . These may lead to psychopathology, presenting in the form of dangerous risk-taking behaviors, problems with identity, or suicidality. In exploration of limits, teenagers may engage in risk-taking behavior in an attempt to develop autonomy and mastery. Caretakers who do not set appropriate limits often exacerbate adolescents' tendency to engage in behaviors that are dangerous to themselves and to others. When problems with identity occur, adolescents may have difficulty assessing personal strengths and weaknesses in the context of various situations. If adolescents underestimate, overestimate, or constrict themselves to an unusual degree, development may be arrested, resulting in increased likelihood for depression, conduct disorder, and anxiety disorders.

Aggressive and delinquent behaviors are part of the psychopathological spectrum that indicates arrested development in the adolescent. The *Diagnostic and Statistical Manual of Mental Disorders* (4th ed.; American Psychiatric

Association, 1994) presents the diagnosis of Oppositional/Defiant Disorder (ODD) as a precursor to Conduct Disorder, which is often regarded as a precursor to Antisocial Personality Disorder. Conduct disordered teenagers often lie, steal, cheat, and act in defiant manners toward authority figures.

Previous studies (e.g., Flannery, Singer, & Wester, 2001; Steiner, Cauffman, & Duxbury, 1999) reported a variety of disturbances in several domains of personality functioning among delinquent youths. Recklessness, lack of a sense of responsibility and inhibition, absence of guilt or regret, poverty of affect, lack of goal directedness, and inadequate capacity for relationships have been associated with psychopathy and antisocial personality. Furthermore, Weiner, Graham, Peter, & Zmuidinas (1991) found that adolescents who exhibit more depression, anxiety, low self-esteem, and low well-being were more likely to have a prior conviction record.

Poverty, abuse, neglect, and poor parenting may also contribute to the development of the adolescent offender (Beyers, Loeber, Wikstrom, & Stouthamer-Loeber, 2001). Parents of adolescent offenders have been found to be severe disciplinarians, irritable and demanding, and have a deficiency in their ability to demonstrate empathy. Furthermore, adolescent offenders have been shown to have family histories of greater degrees of depression, psychotic disorders, substance abuse, parental deviance, poor parenting, and marital discord (Offord, 1989).

Exposure to violence and victimization from violence has been shown to be associated with children's aggressive and violent behaviors. Flannery et al.

(2001) conducted a study among 3,735 high school students, collecting data through anonymous self-report questionnaires that revealed that dangerously violent adolescents had higher levels of exposure to violence and victimization than did a matched control group. Adolescents who had engaged in shootings and/or knife attacks had been witnesses and victims of high levels of violence in their homes, neighborhoods, and schools. Adolescents who had been exposed to or were victims of domestic violence were also more likely to exhibit clinical levels of anger, dissociation, and posttraumatic stress. A predisposition to aggression coupled with abusive or neglectful upbringing and other environmental factors may hinder adolescent development. Adolescence, at best, is a period of difficult transitions in identity. Coupled with other variables in the environment, it is not surprising that some teenagers fail to obtain positive coping skills needed for healthy autonomy and independence.

Little empirical evidence has been found to support the hypothesis that conduct problems can be attributed to a genetic predisposition for aggression (Lock, 1996). Some suggest a psychological and social basis for behavioral problems. Aggression has been hypothesized to be an attempt to avoid feeling powerless or helpless, or an attempt to cope with past traumas. Studies have shown a correlation between victimization and perpetration of violence (Rivara, 1995; Widom, 1989). Exposures to violence and victimization from violence have been shown to be associated with children's aggressive and violent behaviors (Flannery et al., 2001).

Adolescents and Forgiveness From an Object Relations Perspective

Utilizing an object relations developmental model to conceptualize the forgiveness process, Pingleton (1997) purports that forgiveness is primarily a circular concept that includes forgiveness from God, to others, and to self. He contends that failures in forgiveness may be causally linked to a specific arrest in intrapsychic and interpersonal development. Pathological adjustments or fixations in any of these developmental processes preclude progression to the next stage.

According to object relations theory, the infant is fused with mother or caretaker during the state of primary infantile autism. This symbiotic relationship is void of separateness, boundary, or differentiation of the self. Adolescents who have experienced an emotional or physical violation during this earlier developmental stage may have the primary emotion of fear. The person fears the loss of the love object, punishment, and rejection. Pingleton (1997) suggests the ensuing response from this developmental arrest will be a failure to receive forgiveness from God, and this person will not admit guilt or wrongdoing because he or she fears that God will respond with punishment.

Hindrances during separation-individuation (the period of development when the individual is learning to be separate from his or her parent/primary caretaker) will create a failure to give forgiveness to others. When one is violated, an injury to the narcissistic, grandiose self occurs, and the loss is experienced psychologically as a blow to self-esteem and pride that results in a painful awareness of one's limitations, vulnerabilities, and inadequacies. This

person will attempt to ward off narcissistic pain by protecting the vulnerable, damaged self with rage and hostility. Resentment, blame, and anger occur when a person is stuck in this developmental stage. Unless one has internalized God's forgiveness, one cannot forgive others (Pingleton, 1997).

Adolescent offenders may well be fixated at this narcissistic stage of object relations development and attempt to protect themselves with aggressive behaviors. These individuals have likely experienced transgressions of others. When these adolescents develop the ability to offer forgiveness to their transgressors, they may also develop the capacity to seek forgiveness for their own transgressions. However, adolescent offenders fixated in this developmental stage continue to express hostility by engaging in offending behavior. As Pingleton (1997) suggests, these individuals often must reexperience their earlier wounds in the context of safe relationships wherein the original loss and narcissistic injury can be healed. In order to forgive, one must be able to relinquish the egocentric position of viewing the other in terms of their own needs and wishes. Resolution of this stage of development would mean that the person could engage in mature, interdependent relationships and less in self-centeredness.

During the final stage of object relations development, object constancy is achieved. Rather than projectively blaming others, those arrested in this neurotic stage blame themselves, creating punitive guilt. Transgressions experienced during this stage of development may result in the failure to forgive self. These individuals may say something such as, "I'm so bad, I don't deserve

forgiveness." This person tends to split "good" and project it onto another while internalizing the "bad." Resolution of transgressions during this stage will result in the integration of "good" and "bad" self-representations (Pingleton, 1997).

Methodological Considerations

Before reviewing the research on mediators of the forgiveness process, several methodological concerns need to be addressed. First, theorists have offered a variety of opinions about what forgiveness is and what it is not, though most agree that forgiveness is a continuing process rather than a one-time event. In considering the developmental issues of adolescence, one particularly relevant description of this process was proposed by Linn and Linn (1978) and will be discussed in detail.

A second concern is the lack of instruments by which researchers can assess and understand forgiveness. Since this is a relatively new field in psychological research, many researchers have developed their own instrumentation, and few measures have been used in more than one or two studies.

Finally, samples and procedures must be considered. Since no forgiveness studies have been conducted with the adolescent offender population, conclusions drawn from the studies reviewed must be tentatively considered, and broad generalizations should be avoided.

Definitions of Forgiveness

The systematic study of forgiveness requires a consistent definition of forgiveness. This definition has been a source of much debate due to the theoretical nature of forgiveness. Only within the last 10 years has forgiveness been empirically studied, and a shared understanding is essential before conclusions can be drawn from research findings. A fixed definition of forgiveness is nearly impossible to achieve. According to most researchers, the standard dictionary definition misses the core concept. Lamb (1997) stated, "Dictionary definitions are inadequate in that they stress 'pardoning' or 'absolving' a wrongdoer from his bad deeds. As we will learn, there are recent scholars of forgiveness who claim that to forgive does not mean 'to pardon.'"

Takaku (2001) described forgiveness as a process rather than a product of overcoming resentment toward a transgressor. This process involves the victim perceiving the offender in a benevolent way and, subsequently, taking positive action towards reconciliation with the offender. Exline and Baumeister (2000) state their definition in monetary terms: "When one person harms or transgresses against another, this action effectively creates an interpersonal debt. Forgiveness involves the canceling of this debt by the person who has been hurt or wronged" (p. 133). McCullough, Pargament, and Thoresen (2000a, 2000b), who are among the leading researchers and theorists in the field, offer a basic definition of forgiveness as an "intra-individual, prosocial change toward a transgressor that is situated within an interpersonal context" (p. 9). More simply put, Pingleton (1989) defined forgiveness as "giving up one's right to hurt back"

(p. 27), which places emphasis on the interpersonal realm and associated behaviors.

For the purposes of this study, forgiveness is defined as a cognitive, behavioral, and affective process of overcoming resentment and anger towards the offender, which includes a reduction in the grievance and desire for revenge. It is a process that occurs within the victim in which he or she pardons the victim of any debt or penalty. Although this definition is not exhaustive, it combines the basic concepts of forgiveness that are addressed in the studies reviewed.

Five Stages of Forgiveness

In addition to defining forgiveness, an explanation of the psychological processes of forgiveness is needed in order to understand the implications it carries for the adolescent offender. Widely diverging opinions have been offered regarding what is included in the process of forgiveness. Forgiveness does not always include reconciliation, and reconciliation does not necessarily imply that forgiveness has occurred. Reconciliation "implies a willingness to come together to work, play, or live in an atmosphere of trust" (Exline & Baumeister, 2000, p. 136). There are also those who believe that in order to forgive, it is not necessary to release all feelings of resentment, nor is it fundamentally an act of righting wrongs.

A clear description of this process has been set forth by Linn and Linn (1978), who compared the process of forgiveness to Kubler-Ross's (1969) five-stage sequence of the process of death and dying. The sequence of stages is

relatively predictable, and everyone will experience the associated feelings to some degree, though not necessarily as clear and distinct stages as they are presented here. The process of forgiveness includes periods of denial, anger, bargaining, depression, and acceptance.

Denial. When the offense first occurs, the first stage is that of denial. The stage of denial enables one to temporarily ward off feelings of pain, fear, and anger by utilizing psychological defenses such as intellectualization, splitting, projection, minimization, repression, and rationalization to protect the vulnerable sense of self. Sometimes the victim may use avoidance to deal with threats of discomfort. Adolescents may avoid the offender or use alcohol and other substances to numb their pain. A certain degree of denial demonstrates an adaptive function that prevents the victim from becoming crippled by overwhelming anxiety or insecurity (Linn & Linn, 1978).

Anger. The second stage of forgiveness is characterized by the experience of anger in the form of general frustration, judgment, or irritation. The individual may begin to blame others and find fault in order to have a target for anger. Expressions of anger can be particularly threatening (e.g., losing control, losing a friend, getting hurt) and vary among individuals. Adolescents may express anger by acting out and exhibiting defiant behaviors or by withdrawing or using substances (e.g., drugs, alcohol, food) to numb their anger. Unresolved anger may lead to numerous physical ailments (e.g., hypertension, ulcers), and adolescents who internalize their anger may be at increased risk for depression and suicide. Adolescents who externalize anger may engage in antisocial or

deviant acts, displacing their anger onto others. It is the position of this writer that adolescent offenders get fixated at this stage of the process. Feeling anger and dealing with it appropriately within the context of a safe relationship helps the adolescent identify the hurt and heal it in a healthy way. Pinpointing the area of offense and identifying what needs to change facilitates the resolution of anger (Linn & Linn, 1978).

Bargaining. In the third stage, bargaining is exhibited as a mixture of blaming the offender and wanting them to change. During this phase, the victim is likely to withhold forgiveness unless the offender performs some behavior to appease him or her. Offering an exchange in which he or she agrees to let go of anger and blame, the victim sets forth the standards to which the offender is expected to commit. The victim acknowledges the transgression and holds the offender accountable. The victim has not yet been able to look beyond personal hurts to understand what the offender's position might have been. At this stage, the victim still wants the offender to earn forgiveness. This harbored resentment perpetuates the anger and pain (Linn & Linn, 1978).

Depression. During the fourth stage of forgiveness, the individual experiences depression. The victim mourns the loss of what could have been (e.g., a relationship, an opportunity, innocence). The individual no longer has defenses to erect or hostility to express; he or she has expended all bargaining chips. All that is left is a vulnerable self that is exposed and hurt. The individual realizes the truth about the offense and realizes that both victim and offender are imperfect. The residual effects of the offense are pain and brokenness. The

victim may experience increased depression due to guilty feelings about having punished the other or due to inappropriate expressions of anger (Linn & Linn, 1978).

Acceptance. Acceptance of the final stage is different from the acceptance that the transgression took place as mentioned in the bargaining stage. In this final stage, the victim accepts the offender with all faults and shortcomings, admitting the experience of suffering while forgiving the offender. However, this process is primarily internal and may or may not include reconciliation with the offender. Growth occurs as a result of working through the emotional pain and gaining insight about self and other. Accepting another involves accepting oneself, feeling emotions, being open to others, and offering forgiveness without conditions. Acceptance allows the individual to gain meaning from the experience that provides a sense of direction and fulfillment (Linn & Linn, 1978).

Instruments

Just as there have been variations in the definition of forgiveness, there are also variations in the instruments that have been developed to study the concept. Although new measures are still being created, a few scales have been widely used in forgiveness research and have been shown to be valid and reliable instruments.

The Forgiveness Scale (Wade, 1989) is one of the most widely used methods of assessing forgiveness. This measure consists of separate scales designed to distinguish between forgiving and not forgiving. Based on responses of 282 college students, the Forgiveness Scale has been divided into

subscales that measure thoughts, feelings, and behaviors. Through statistical analysis, this measure identified five distinct factors: (a) decreased obsession about the offense, (b) decreased desire for revenge, (c) efforts to let go of grudges and not avoid the offender, (d) movement toward God, and (e) positive feelings toward the offender. Cronbach alpha reliabilities for internal consistency ranged from .79 to .95 for the subscales. However, the norming sample consisted of community college students enrolled in advanced psychology classes, so findings may not be generalizable to other populations.

Another popular method of assessing forgiveness was the General Forgiveness Scale (Trainer, 1981). The General Forgiveness Scale has nine items and three independent scales. The general scale assesses five elements: (a) overt gestures of reconciliation, (b) cessation of overt hostile impulses, (c) letting go of resentment, (d) re-emergence of positive attitudes and feelings toward offender, and (e) gestures of good will. Factor analysis and split-half reliability have indicated good reliability and validity for these scales.

Many researchers developed new measures by which they could operationalize forgiveness constructs. Other researchers adapted portions of other scales (e.g., the Forgiveness Scale) and added new components relevant to their samples in order to address their specific research questions. Most instruments were self-report measures that were comprised of Likert-scale responses to questions about issues of forgiveness.

Samples and Procedures

The most consistently used sampling procedure has been to use college students who received extra credit in their classes for their participation. Their ages ranged from 18 to 30 years, although a few studies included children, adolescents, and the elderly. Most studies reviewed were conducted in the United States, with the exception of two studies that were conducted in Taiwan and Europe. Although the majority of study participants have been Caucasian, researchers have made efforts to include those of varying ethnicities.

Most studies employed self-report measures. However, other procedures included the use of vignettes or reports of personal events in which respondents had been wronged. Split-half reliability, correlations between parts of the scale and the whole scale, factor analyses, and discriminant analyses have yielded good reliability and validity for self-report measures (McCullough et al., 1998). Nevertheless, self-report scales also have limitations in that they cannot adequately measure the entire scope of the forgiveness construct, which probably accounts for why no one measure has been adopted in the literature. Little psychometric work has been done to explore non-self-report or behavioral measures of forgiveness. Behavioral measures of forgiveness could help ensure the validity of the study of forgiveness.

Mediators in the Process of Forgiveness

Due to the complex and esoteric nature of forgiveness, attempts at forgiveness will vary with personality, personal history, and severity of the

offense. One's understanding of forgiving others may be limited to personal experience of being forgiven and level of emotional development. Forgiveness is not an easy process, and psychological risks make the act both difficult and rare. Forgiveness may be given superficially, incompletely, or not at all. Sometimes, people make conscious decisions to not forgive and, in fact, may engage in revengeful behavior, consciously choosing to entertain anger and hostility towards the offender. Much is at stake in the process of forgiveness. The person's pride is at risk since granting forgiveness may communicate to the offender that the damage was minimal or unimportant. The victim may believe that nothing is gained except giving relief to the offender.

As previously discussed, whether a person forgives will likely be dependent on factors relevant to the individual's achieved stage of emotional development. Some may never forgive due to fear of rejection or threat of punishment, abandonment, or annihilation (Pingleton, 1997). Others, (adolescents, in particular) may remain stuck in their anger, resentment, bitterness, hatred, and hostility, thereby precluding forgiveness. Finally, some individuals who fail to complete the process of forgiveness will turn their anger on themselves and endure continuing self-punitive guilt.

Unforgiveness is an uncomfortable position that leaves one plagued with negative, painful emotions. When combined with endless ruminations about causes and consequences, unforgiveness precludes further emotional growth. A number of potential mediators have been identified that contribute to the process of forgiveness. A review of relevant mediators in the process of

forgiveness will now be presented. An understanding of these factors may be helpful in informing treatment that can facilitate the process of forgiveness. These mediators include anger, guilt, revenge, locus of control, self-esteem and narcissism, empathy, remorse, commitment, and intrinsic religiosity.

Anger

Huang and Enright (2000) looked at the relationship between forgiveness and anger-related emotions in an adult sample in Taiwan. Sixty participants (average age = 23.5 years; range = 18-41 years) were selected from a pool of 1,427 adults who completed the Objective Scale of Forgiveness, developed for the purposes of this study, to assess the developmental levels of forgiveness on transgressions that occurred within the last 3 years. Responses were scored on a Likert-type scale that ranged from 1 (*being revengeful*) to 6 (*forgiveness as love*). Participants with level 4 (*lawful expectations of forgiveness*) or level 6 (*forgiveness as love*) responses were included in the study.

Participants' affective states were assessed as (or directly after) they retold the story of a transgression. Huang and Enright (2000) hypothesized that those who were lower on the developmental scale of forgiveness would be higher in anger. The Anger Expression Scale, a 20-item questionnaire, was used to measure participants' anger. The internal consistency of the scale ranged from .70 to .84, and reliability using Cronbach's alpha was .84. The Facial Action Coding System (FACS; Ekman & Friesen, 1978) was used to code facial expressions (especially masking smiles) that are associated with distress, sadness, pain, fear, and anger. Measures of casting down of the eyes and blood

pressure were also assessed to determine signs of masking negative emotions or suppressed anger.

Huang and Enright (2000) conducted matched *t* tests to compare differences on the self-report anger scale. No differences between level 4 and level 6 groups were found for conscious self-reporting of anger. Results of nonverbal behaviors indicated that residual negative affect regarding the transgression was higher for participants at level 4 than it was for their level 6 counterparts. This was true for masking smiles (t [29] = 2.23, $p < .05$), frequencies of looking down (t [29] = 2.18, $p < .05$), and higher blood pressure (t [21] = 2.86, $p < .05$). These findings suggest that those who had less developed views of forgiveness were more likely to experience anger-related emotions. Those who had a level 4 understandings of forgiveness demonstrated greater residual anger than did level 6 forgivers.

The findings of this study (Huang & Enright, 2000) are interesting when applied to adolescents because they confirm that, since adolescents may have less mature attitudes towards forgiveness, they would be more likely to have experiences of anger and other anger related emotions. It makes sense that offenders act out the anger they may be feeling and would , therefore, be less likely to forgive. The results of this study should be taken with caution, however, since Taiwanese adolescents may have different attitudes towards forgiveness and different ways of expressing anger than would those from other cultures. Moreover, the sample size was fairly small, so the findings need to be replicated with a larger sample representing various ethnicities.

Guilt

Tangney (1991) examined the relationship between shame-proneness, guilt-proneness, and empathic responsiveness in study of 101 undergraduate students (age range = 15-36 years). Participants completed measures of shame and guilt using the Self-Conscious Affect and Attribution Inventory (SCAAI; Tangney & Feshbach, 1988), which consists of 13 brief scenarios designed to elicit responses of shame, guilt, externalization, and detachment/unconcern. Estimates of internal consistency ranged from .74 to .82, and the measure has demonstrated satisfactory reliability.

Students were also given the Empathy Scale for Adults (Feshbach & Lipian, 1987), a 59-item paper-and-pencil measure that yields four empathy subscales: cognitive empathy, affective cue discrimination, emotional responsiveness and a total empathy index. Internal consistency was modest with alphas ranging from .65 to .74. Also administered was the Interpersonal Reactivity Index (IRI; Davis, 1980), a 28-item measure that yields two cognitively oriented empathy subscales and two emotionally oriented empathy subscales. Indices of internal consistency ranged from .77 to .78 (Tangney, 1991).

Tangney's (1991) findings revealed that proneness to shame (as measured by the SCAAI) was negatively correlated with empathic responsiveness ($r = -.22$, $p < .05$), suggesting that shame-prone individuals are less empathic compared to others. Results of the study also suggests that guilt-proneness is associated with enhanced empathic responsiveness. General capacity for empathy ($r = .49$, $p < .001$), cognitive empathy ($r = .23$, $p < .001$), and total empathy ($r = .37$, $p < .001$)

were positively correlated with proneness to guilt. The general patterns that emerged suggest that proneness to shame is related to an impaired capacity for empathy, whereas proneness to guilt is related to enhanced empathic responsiveness. To distinguish shame from guilt, part correlations were conducted and revealed that shame was even more negatively correlated with empathy, whereas guilt was positively associated with empathy.

This study (Tangney, 1991) related shame and guilt to empathy. Other studies (e.g., Al-Mabuk & Enright, 1995; McCullough, Worthington, & Rachal, 1997) have linked empathy to forgiveness. Thus, these findings suggest that guilt may facilitate the process of forgiveness, whereas shame may hinder the process of forgiveness.

The following study by Konstam, Chernoff, and Deveney (2001) directly examined these links. In a study of 138 graduate students (average age = 34 years; *SD* = 12 years), Konstam et al. explored forgiving and its relationship to proneness to shame, guilt, anger, and empathic responsiveness. Respondents (81% women) represented a range of religious affiliations. They completed the Enright Forgiveness Inventory (EFI; Subkoviak et al., 1995), a 60-item measure designed to assess the degree to which an individual forgives an offender. Internal consistency coefficients for the EFI have been .98, and test-retest reliability has been .86. Respondents also completed the Interpersonal Reactivity Index (IRI; Davis, 1980), used to assess dimensions of empathy; the Test of Self-Conscious Affect (TOSCA; Tangney, 1991), used to assess responses associated with shame and guilt; and a measure of anger developed for the study. The

researchers hypothesized that there would be a positive relationship between guilt-proneness and forgiveness and a negative relationship between shame-proneness and forgiveness.

Results indicated that guilt-proneness was positively related to forgiveness ($r = .205$, $p < .05$). Empathic concern and perspective-taking were also positively related to total forgiveness ($r = .17$, $p < .05$; $r = .23$, $p < .01$ respectively), whereas shame was negatively related to forgiveness ($r = -.061$, $p < .05$). These findings suggest that shame-proneness has a minimal contribution to the inhibition of the forgiveness process, and that guilt serves to help individuals through the forgiveness process. Guilt seems to depend on an empathic awareness of one's own distress as well as that of the offender, whereas shame is more likely to be focused on oneself and one's own distress. Adolescents who have difficulty forgiving may be more shame-prone and more aware of their own distress than able to empathize with others (Konstam et al., 2001).

Revenge

Bradfield and Aquino (1999) researched the effects of revenge on forgiveness in the workplace. Participants were 237 employees of various ethnicities from a government agency. The average age was 42.9 years ($SD = 8.5$ years), and average job tenure was 10.1 years ($SD = 6.6$ years). A critical incident technique was used to elicit salient experiences of workplace offenses that occurred within the last 6 months. After describing the offense, each respondent answered a series of questions regarding his or her cognitive and behavioral

responses to the offense. The researchers used forgiveness items adapted from an instrument developed by Wade (1989) to measure forgiveness. Seven items assessed thoughts of revenge, and five items assessed forgiveness behavior. The independent variables measured were attributions of blame, offender likeableness, offense severity, revenge cognitions, and forgiveness cognitions. The dependent variables studied were revenge behavior and forgiveness behavior.

Statistical analyses revealed a medium to large effect size and a negative relationship between revenge and forgiveness cognitions ($\chi 2$ (10 *df*) = 31.04, $p <$ .01). This suggests that the more a person contemplates revenge, the less likely he or she will think about forgiveness. Bradfield and Aquino (1999) also found that a significant correlation between revenge and forgiveness cognitions was positively related to their behavioral equivalents. That is, the more individuals had revenge cognitions, the more likely they were to engage in revenge behavior. Blame attributions also influenced revenge cognitions in that the more a person blamed the offender, the more likely he or she was to have revenge cognitions. Finally, the negative relationship between revenge and forgiveness cognitions suggests that these strategies are conflicting approaches for dealing with injustice and that that forgiveness is not likely to occur if one desires revenge.

The potential application of these findings to the present discussion is that adolescents may engage in revengeful behaviors that prohibit their ability

to forgive others. They may be in a place where they are acting out their revenge cognitions rather than entertaining thoughts of forgiveness.

Locus of Control

Takaku (2001) studied the effects of a victim's perspective taking and offender's apology on interpersonal forgiveness among 75 college students (19 men, 56 women; mean age 20.47 years, SD = 2.87 years) taking introductory psychology classes. Measuring locus of control (attributes), emotional reactions, and behavioral intentions, Takaku hypothesized that a higher score on external locus of control (regarding a transgression) would directly influence positive emotions and subsequently increases the likelihood of forgiveness. Attributions were measured by the Revised Causal Dimension Scale (McAuley & Shaffer, 1993). Respondents used a 9-point Likert scale to rate three dimensions of locus of control: (a) *internal* to *external*, (b) *stable* to *temporary over time*, and (c) *controllable* to *uncontrollable* by self or others. The researcher measured negative (e.g., anger, annoyance, bitterness) and positive (e.g., sympathy, sorrow, compassion) affective reactions on a Likert-type scale. He also developed a four-item Likert-scale measure of behavioral intentions to assess the degree of forgiveness.

Using a multiple regression analysis, Takaku (2001) found that persons who perceived the cause of transgression as stable and internal to the offender were more likely to experience negative emotional reactions and were less likely to offer forgiveness (β= .343 and .357, respectively, $p < .01$). Controllability was not significant, and the only variable found to significantly predict positive

emotional reactions was the stability dimension ($\beta = -.258$, $p < .05$). Those who perceived the cause of the transgression as less stable experienced more positive emotional reactions than did those who perceived the cause of the transgression as more stable. These findings revealed that those with high negative emotional reactions were less likely to forgive ($\beta = -.30$, $p < .01$), whereas those with positive emotional reactions were more likely to offer forgiveness ($\beta = .326$, $p < .01$). These findings suggest that persons with high internal locus of control are more likely to experience positive emotional reactions that, in turn, increase the likelihood of granting forgiveness. Since this study was conducted on college students, its findings may be more easily generalized to adolescents due to the closeness of their ages. However, this could be confirmed by replicating the study with a high school sample.

Kelley and Stack (2000) surveyed 1,892 at-risk adolescents (ages 14-20 years) from 17 nations, expecting to find a positive correlation between locus of control and adolescent well-being. Locus of control was measured by responses to the following statement that had been translated into the appropriate languages:

> Some people feel they have completely free choice and control over the way their lives turn out, and other people feel that what they themselves do has no real effect on what happens to them. Please use the scale to indicate how much freedom you feel you have over the way your life turns out. (pp. 7-8)

Answers were rated on a 10-point Likert scale that ranged from 1 (*none at all*) to 10 (*a great deal*). Adolescent well-being (global happiness and life satisfaction) was measured by responses to two questions. Controlling for demographic variables, findings supported the hypothesis that the greater the sense of an internal locus of control, the greater the perceived global happiness, perceived health, and life satisfaction (βs = .206, .245, and .141, respectively, $p < .05$). The sample was divided into high internal (9%) and low internal (91%) locus of control groups, indicating that the majority of these at-risk adolescents viewed happiness and life satisfaction as contingent upon outside circumstances rather than personal resources. These findings suggest that at-risk adolescents tend to have low internal/high external locus of control that may result in lower levels of happiness and well-being. If adolescent offenders believe they cannot control outside events, then they are likely to have less happiness and more negative emotional reactions. Taken in concert with the Takaku (2001) study, such at-risk adolescents will be less likely to grant forgiveness.

Several problems are inherent in Kelley and Stack's (2000) study. The first issue is their use of single-item measures that may have questionable reliability and validity. Single-item scales may not be robust enough to measure adequately the full domain of the construct. Additionally, the questions posed may have different meanings when translated into different languages. Therefore, caution should be exercised in interpreting these results. Nevertheless, the authors indicated that the measures have been used in numerous other studies that have been replicated and have been found to have

solid reliability and validity (Lee, Seccombe, & Shehan, as cited in Kelley & Stack, 2000). Future research is needed that utilizes more comprehensive measures to obtain more definitive conclusions.

Swenson and Kennedy (1995) examined the relationship between perceived control and treatment outcomes with chronic adolescent offenders. They studied 307 adolescents (ages 14-18 years) in a state training school in the Southeast United States. Each participant had committed a felony in addition to having a previous criminal history. Ninety-seven were Caucasian, 201 were African-American, and 9 were Hispanic.

Swenson and Kennedy (1995) used the Child Behavior Checklist (CBCL; Achenbach & Edelbrock, 1986), which lists 118 child behavior problems and provides summary scores for internalizing and externalizing problems. The Multidimensional Measure of Children's Perceptions of Control (MMCPC; Connell, 1985) was used to measure perceived contingency (internal, powerful other, and unknown sources of control). The MMCPC had not been used previously with adolescent offenders; therefore, internal consistency measures were computed, yielding coefficient alphas ranging from .43 to .71. The Piers-Harris Self-Concept Scale (Piers, 1984), comprised of 80 yes-or-no questions, was used to assess perceived competence and yielded a global measure of self-concept. Finally, daily data collected from the behavior management program was used to assess treatment outcome with an interrater reliability of .55. The data (pre- and post-measures) were gathered over a 1-year period.

Stepwise multiple regression was used to assess the relationship between perceived control (personal responsibility) and treatment outcomes. Swenson and Kennedy (1995) found a positive relationship between perceived competence (personal ability) and perceived contingency (effect of one's behavior) in treatment outcomes of adolescent offenders (adjusted $R^2 = .12$). In other words, adolescents who perceived themselves to have more control were more likely to have positive treatment outcomes. Their emotional growth may further increase the likelihood of forgiving others.

Findings of the previous studies (Kelley & Stack, 2000; Takaku, 2001) suggest that forgiveness is more likely to be granted if the offense is viewed as external, unstable, and uncontrollable. If adolescents have a high internal locus of control themselves, they are more likely to have positive emotions and more successful treatment outcomes. Therefore, they are more likely to engage in the process of forgiveness as well.

Narcissism

Sandage, Worthington, Hight, and Berry (2000) explored whether personality variables predict seeking forgiveness in a particular relationship. Participants were 232 student volunteers (mean age = 21.5 years; range = 18-55 years) who reported experiencing a troubled relationship during which they had transgressed against their partner in the past year. Variables included seeking forgiveness, religiosity, developmental level of forgiveness, narcissism, and self-monitoring.

The Seeking Forgiveness Scale (SFS) created for this study required that participants indicate their most serious offense and rate its severity on a 5-point Likert scale. The level of seeking forgiveness was also evaluated. Estimated internal consistency of the Seeking Forgiveness Scale was .95. The Religiosity Scale used in this study consists of two items taken from the original Religiousness Scale (Strayhorn, Weidman, & Larson, 1990) and two items written by Gorsuch and McPherson (1989) to distinguish between intrinsic and extrinsic dimensions of religiosity. The estimated internal consistency of the Religiosity Scale was .80. The Developmental Level of Forgiveness Scale (DLFS), also created for this study, required participants select one of five developmental responses to hypothetical scenarios involving wrongful deeds. Narcissism was measured with the first 27 items of the Narcissistic Personality Inventory (NPI; Raskin & Hall, 1979). The full NPI questionnaire consists of 54 items measuring individual differences in narcissism as a personality trait and had an estimated reliability of .86. Self-monitoring was measured using the Self-Monitoring Scale (Snyder, 1974), a 25-item true-false test of self-descriptive statements concerning attention to self-presentation. Its internal consistency was estimated at .66, and reliability was estimated at .94 (Sandage et al., 2000).

Hierarchical multiple regression analysis explored the unique contribution of each variable. Sandage et al. (2000) controlled for religion and age to test their hypothesis that narcissism and self-monitoring would be negatively related to seeking forgiveness. Neither religiosity nor age predicted seeking forgiveness. Developmental reasoning (R^2 change= .01, $p < .0001$),

narcissism (r = -.34, p < .0001)., and self-monitoring (r = -.37, p < .0001) were related to seeking forgiveness. When narcissism was entered in the last step, the overall model was significant, F (4, 225) = 11.97, p < .0001, and accounted for 24% of the variance in seeking forgiveness. When self-monitoring was entered in the last step in lieu of narcissism, the results were similar, F (4, 225) = 13.01, p < .0001, and accounted for 26% of the variance. These findings suggest that when age, religion, and developmental levels are controlled for, there is a negative relationship between narcissism and seeking forgiveness. Therefore, those with narcissistic personality traits might have significantly more difficulty seeking forgiveness if they have committed a transgression.

These findings have significant implications to the adolescent offender who may have narcissistic personality traits due to their developmental level or who may have experienced empathic failures by significant others in the process of developing moral emotions. Adolescent offenders may have exploitive tendencies and continue to engage in offensive behaviors that are inconsistent with either offering and seeking forgiveness. This is consistent with a developmental view of the adolescent who may not have fully developed understandings of forgiveness and, therefore, may be less likely to grant or seek forgiveness.

Seeking empirical support for their hypothesis that low self-esteem predicts violence and aggression, Bushman and Baumeister (1998) conducted two studies that measured self-esteem and narcissism. Two hundred-sixty undergraduate psychology students completed the NPI and a measure of self-

esteem (Rosenberg, 1965). Participants were exposed to conditions in which their egos were threatened and in which they had the opportunity to express aggression toward their offenders.

Regression analysis revealed an interaction between narcissism and ego threat, F (1, 245) = 5.04, $p < .05$, $\beta = .08$, $SE = .03$. Those who scored high on narcissism were more likely to become aggressive when their egos were threatened. Ego threats in the form of insulting, negative evaluations increased aggressive responding for all types of individuals; however, the aggressive responses were strongest among those who scored high on narcissism. A mediation analysis confirmed that threats served as a mediator between narcissism and aggression. Greater levels of narcissism were associated with more aggressive behavior (Bushman & Baumeister, 1998).

These findings support the view that if adolescent offenders are developmentally stuck in narcissism and have grandiose views of themselves, they will be more likely to engage in aggression, particularly in response to a threat to self-esteem. Those with narcissistic personality characteristics are less likely in general to grant forgiveness.

Empathy

McCullough et al. (1997) conducted a study to investigate the hypothesis that people forgive others to the extent that they experience empathy for them. The researchers developed measures of empathy and forgiveness to assess whether empathy would mediate apology (by an offender) and forgiving (by a victim), and whether forgiving would lead to increased conciliatory behavior

and decreased avoidance behavior among 239 undergraduate students. Degree of apology was measured by two 5-point Likert-type items that elicited the degree to which participants perceived that their offenders had apologized and had attempted to explain their hurtful behavior. Affective empathy (sympathetic, empathic, concerned, moved, compassionate, warm, softhearted, tender) was rated on a 6-point scale indicating the degree to which participants felt each emotion (Archer, Diaz-Loving, Gollwitzer, Davis, & Foushee, 1981; Batson, Bolen, Cross, & Neuringer-Benefiel, 1986). Forgiveness was measured by the Forgiveness Scale (Wade, 1989) to determine the discriminant validity of the empathy and forgiving measures. Conciliatory behaviors toward the offender were measured by two items assessing the degree to which respondents had engaged in attempts for reconciliation with the offender. Finally, three items assessed the degree of avoidant behavior toward the offender.

Using empathy and forgiveness in a series of structural equation models, McCullough et al. (1997) found a significant correlation between apologizing and forgiveness ($r = .64$, $p < .05$). Empathy was found to have a mediating effect on apologizing and forgiveness. Apologizing also increased empathy, which increased the likelihood of granting forgiveness ($\beta = .75$, $p < .001$). The data suggest that an offender's apology facilitates increased empathy for the offender, which, in turn, reduces the victim's motivation to retaliate.

These findings suggest that forgiveness is more likely if the victim experiences some measure of empathy toward the offender. This can be facilitated by the offender's apology or other conciliatory behavior. Since

adolescent offenders have often been victims, experiencing empathy for their offenders can facilitate the forgiveness process.

Al-Mabuk and Enright (1995) studied forgiveness education among parentally love-deprived late adolescents (average age = 20 years; range = 18-21 years) to determine whether forgiveness education that included the affective component of empathy could have positive mental health effects and effectively facilitate forgiveness. Forty-eight students who had been at college for an average of 3 years were randomly divided into experimental and control groups. The experimental group engaged in a group-centered program that focused on forgiving a parent.

Participants completed the Psychological Profile of Forgiveness Scale (Hebl & Enright, 1993), a 30-item scale designed to measure the degree to which an individual forgives a parent. Reliability of this measure was .90 to .95. Each person also completed the Willingness to Forgive Scale and the Hope Scale, both of which were developed by the researchers for this study. The Attitude Toward Mother/Father Scale (Hudson, 1976) was used to assess current parental relationships, whereas the Hope Scale was used to assess optimism toward the future of parental relationships. The Self-Esteem inventory (CSEI; Coopersmith, 1981), the Strait-Trait Anxiety Inventory (STAI; Spielberger, Gorsuch, Lushene, Vagg, & Jacobs, 1983), and the Beck Depression Inventory (Beck, Ward, Mendelson, Mock, & Erbaugh, 1961) were also completed by members of both groups, which met independently for four sessions in a workshop format (Al-Mabuk & Enright, 1995).

Experimental results for pre- and post-test were analyzed with a one-tailed *t* test. After the workshops, members of the experimental group were more willing to forgive ($t = -5.25$, $p < .05$) and more hopeful about their relationships with their parents ($t = -2.68$, $p < .05$) than were those in the control group. At post-test, the entire sample showed statistically significant correlations between scores on the forgiveness scale with anxiety, psychological depression, and self-esteem ($rs = -.37$, $-.46$, and $.40$, respectively, $p < .05$). These findings suggest that increased willingness to forgive is associated with decreased levels of depression and anxiety, and higher levels of self-esteem (Al-Mabuk & Enright, 1995).

Remorse

Gold and Weiner (2000) tested the hypothesis that perceptions of remorse are necessary for a confession to be effective. Participants were 167 undergraduates enrolled in an upper division psychology class. Scenarios of historical events were presented that highlighted three levels of confession: (a) confession with remorse, (b) confession with no remorse, and (c) no confession. Using a 7-point Likert scale , participants responded to seven questions written by the authors regarding the likelihood that the offender would commit the transgression again and whether or not they thought the offender should be punished or forgiven.

Results of a MANOVA revealed that participants were more likely to forgive the offender if he or she showed remorse, $F(12, 314) = 7.55$, $p < .001$, partial $\eta^2 = .08$. Findings revealed that moral character, sympathy, and the

absence of punishment were also higher when remorse was apparent. These findings suggest that victims are more likely to forgive their offenders if expressions of remorse accompany their confessions. Victims may also be less likely to want them to be punished, and they may experience higher levels of sympathy and view their offenders as having higher moral character (Gold & Weiner, 2000).

The reliability and validity of the instrument used in this study (Gold & Weiner, 2000) are unknown; therefore, results should be interpreted with caution since it may or may not measure what its authors intended. Confession may not be a good indicator of remorse since it may actually be a method for impression management. Nevertheless, if adolescents believe that their transgressors are truly sorry for what they have done, they may be motivated to forgive them.

Commitment

McCullough et al. (1998) recruited 116 heterosexual couples by distributing packets of questionnaires to students in introductory psychology classes to examine the association among forgiving, relational commitment, and adjustment. McCullough et al. hypothesized that scores on a measure of Transgression-Related Interpersonal Motivations (TRIM), would be correlated with a measure of relational commitment and adjustment, not only within persons, but across relationship partners as well. Both the student and his or her partner completed the questionnaire packet. Participants varied in ethnicity. The mean age for men was 22.1 years (*SD*= 7.2 years) and was 21.1 years (*SD* = 7.9

years) for women. Thirteen couples were married, 22 couples were engaged, 18 couples were cohabiting, and 61 couples were dating.

Participants completed the TRIM, a 12-item scale that instructed them to think of the most severe offense that their partners caused them and then to indicate their thoughts and feelings toward their partners in light of the offense. The Dyadic Adjustment Scale (DAS; Spanier, 1976) was used to assess the quality of the relationships. The DAS is a 32-item instrument divided into four subscales that measure the degree of dyadic consensus, affectional expression, dyadic satisfaction, and dyadic cohesion. Coefficient alphas for the total DAS scores exceed .90. The Commitment Inventory (Stanley & Markman, 1992) was used to assess dedication and constraint as aspects of individuals' commitment to their close relationships. Coefficient alphas for these subscales exceed .90.

McCullough et al. (1998) conducted a series of seven paired *t* tests that showed that TRIM scores were substantially associated with dyadic satisfaction of commitment within persons and across persons. High scores on the two TRIM subscales indicate higher levels of avoidance and revenge, respectively. Participants' reports of forgiving their partner for the most severe offense was significantly correlated with their partners' reports of dyadic satisfaction and commitment. Those partners who had lower scores of avoidance and revenge ($r = -.21$, $p < .05$ and $r = -.46$, $p < .001$, respectively) tended to have partners who had higher scores on dyadic satisfaction.

The TRIM has been used in several studies by McCullough et al. (1998), and its subscales have proven to have high internal consistency reliabilities

ranging from .86 to .93. Since many instruments used to assess forgiveness are relatively new, the use of the TRIM is a strength of this study.

Because the study was conducted among persons in romantic relationships, findings may not be generalizable to adolescents who are struggling in other types of relationships. Nevertheless, the implication for adolescents is that, even though the potential for hurt may be great in close relationships (e.g., family, friends), they may be more likely to forgive those with whom they are emotionally committed.

Intrinsic Religiosity

Mullet, Houdbine, Laumonier, and Girard (1998) looked at various circumstances that may moderate the willingness to forgive in a sample of 474 adults (age range = 18 to 90 years). Participants were divided into four groups according to age as follows: very young (18-25 years old), young (26-40 years old), middle-aged (41-65 years old), and elderly (older than 65 years) adults. Participants were contacted along city sidewalks and agreed to answer the questionnaire developed for this study. Eight questions were related to demographics, and 38 questions were about participants' attitudes toward forgiveness. Responses to each question were scored on a 17-point scale ranging from *completely agree* to *disagree completely*.

In an exploratory factor analysis, the following four factors emerged: revenge (accounting for 14% of the variance), personal and social circumstances (accounting for 9% of the variance), forgiveness (accounting for 11% of the variance), and obstacles to forgiveness (accounting for 12% of the variance).

Findings revealed that age was most strongly correlated with revenge, F (3, 466) = 15.34, $p < .0001$, in that very young adults were more prone to seek revenge than they were to forgive. People who expressed a belief in God had lower scores on revenge than did those who declared themselves nonbelievers, F (1, 460) = 8.63, $p < .004$. Furthermore, those who stated that they were religious indicated that they had fewer obstacles to forgiveness than did those who were not religious, F (1, 467) = 19.90, $p < .00001$ (Mullet et al., 1998).

These findings suggest that older and more religious people are more likely to forgive than are younger and less religious people. The latter are also more likely to want revenge and to have more barriers to forgiveness. These findings offer additional support for the hypothesis that adolescents who have experienced a transgression against them are less likely to forgive and more likely to seek revenge. However, if they are religious, they may have fewer barriers in granting forgiveness than those who are nonreligious.

Gorsuch and Hao (1993) selected 1,030 respondents (513 men, 517 women) by stratified random sampling. The sample was predominantly White (80.5%) and Protestant (59.6%). A Gallup-poll questionnaire was used to examine the relationship among forgiveness (25 items) and religious (15 items) variables. A factor analysis revealed two factors: personal religiousness (importance of religion, intrinsic religiousness, closeness to God, church/synagogue membership) and religious conformity (believing in God with no doubts, growing in a love relationship with God and fellow humans, following teachings of a religious institution, attending religious services).

A one-way ANOVA was used to examine the relationship between forgiveness factors and religiousness. Findings suggested that Protestants (*T* score = 50.7) engaged in more proactive forgiving responses ($p < .01$) than did those with no religion or those of other religions (*T* score = 47.7). The personal religiousness factor was mildly correlated with all forgiveness factors: having a forgiving motive ($r = .20$), religious response (e.g., praying for another or asking God for help; $r = .41$), forgiving pro-action (e.g., movement toward another person; $r = .14$), and hostility or not forgiving ($r = -.18$, $p < .0001$). Findings were not significant regarding the relationship between religious conformity and forgiveness factors (Gorsuch & Hao, 1993).

These findings suggest that those who are more intrinsically religious tend to be more forgiving and have less hostility than are those who are not religious. However, personal religiosity may not necessarily be equated with religious conformity. It would be worth considering whether adolescents' religious preferences and/or personal religiosity would promote or increase the likelihood of forgiveness. If their level of spiritual maturity is not well-developed, it may have little impact on their capacity to forgive.

Summary and Conclusions

The purpose of this paper was to examine theory and research on the subject of forgiveness and how forgiveness concepts might be relevant in the treatment of adolescent offenders. For the purposes of this review, forgiveness has been defined as a cognitive, behavioral, and affective process of overcoming

resentment and anger towards the offender, which includes a reduction in the grievance and desire for revenge. Linn and Linn's (1978) stages of the forgiveness process (denial, anger, bargaining, depression, and acceptance) were discussed briefly. Although no studies have been conducted on the topic of adolescent offenders and forgiveness, issues of adolescent development appear to be relevant to whether one can forgive or not. This author hypothesized that adolescent offenders are developmentally arrested at the anger stage of forgiveness, are acting on that anger, and consequently are unlikely to complete the forgiving process.

Adolescence is a time of challenge and turmoil during which numerous changes are taking place. Adolescents have the major task of developing a sense of identity separate from their parents, friends, and others. They learn about their personal strengths, weaknesses, beliefs, and value systems. Sometimes adolescents adopt oppositional roles in order to increase their confidence in their capabilities and to develop problem-solving and coping skills.

Along with the challenges inherent in adolescent development, outside threats may also occur that can encumber normal development. Issues such as poverty, abuse, neglect, or poor parenting impact the developmental process. Consequently, teens may respond to others with hostility, aggression, and violence. Being fixated at the anger stage will likely preclude completion of the forgiveness process. Research (e.g., Flannery et al., 2001) has shown that violent adolescents are more likely to be witnesses to and victims of violence in their homes, neighborhoods, and/or schools. These findings suggest that adolescent

offenders often have experienced significant traumas and transgressions in which they have been wronged. Because of their arrested development, these adolescents may be stuck in their anger and may offend others in response to the violations against them. Before they can develop the capacity to seek forgiveness for their own offenses, they may first need to forgive those who have wronged them.

Correlational studies reviewed in this paper suggest that a number of mediators are relevant to the study of forgiveness. Nine mediating variables were discussed in this paper: anger, guilt, revenge, locus of control, narcissism, empathy, remorse, commitment, and intrinsic religiosity. Findings revealed that guilt (Konstam et al., 2001; Tangney, 1991), an internal locus of control (Kelley & Stack, 2000; Swenson & Kennedy, 1995; Takaku, 2001), empathy (Al-Mabuk & Enright, 1995; McCullough et al., 1997), remorse (Gold & Weiner, 2000), commitment (McCullough et al., 1998), and intrinsic religiosity (Gorsuch & Hao, 1993; Mullet et al., 1998) were positively associated with forgiveness. Conversely, anger (Huang & Enright, 2000), revenge (Bradfield & Aquino, 1999), and narcissism (Bushman & Baumeister, 1998; Sandage et al., 2000) were negatively associated with forgiveness.

In addition, studies have revealed different levels of forgiveness that vary with one's stage of development. Adolescents have been found to be more likely than older people to seek revenge (see Mullet et al., 1998). However, adolescents are more likely to forgive if they are pressured by others to do so, which is indicative of immature concepts of forgiveness (Steiner et al., 1999). Finally,

narcissistic response to threats to self-esteem has been related to decreased levels of forgiveness and increased levels of anger and aggression (Sandage et al., 2000). Remaining in the stage of anger necessarily precludes working through the process of forgiveness. Success in achieving forgiveness can take place, however, if the adolescent can experience empathy for the offender in the context and safety of close relationships.

Clinical Implications

My original interest in this topic stemmed from a desire to understand the factors that could lead an adolescent to seek sincere forgiveness from his or her victim. I wanted to study how an offender could learn to accept responsibility for his or her behavior and take subsequent reparative action. However, as I reviewed the literature, it became apparent that adolescent offenders have frequently been victims themselves. Through a cycle of violence and trauma, adolescent offenders appear to be the product of family conflict, impaired parent-child interactions, neglect, and poverty that place them at high risk for delinquency. Data on adolescent offenders reveals a strong correlation between witnessing and/or being a victim of violence in the home, school, or neighborhood and engaging in delinquent behaviors.

Although crime committed by adolescents is a major issue that needs to be addressed by society, factors that make up the psychological profile of the adolescent offender must be considered. Because of the increasing incidence of severe crimes commited by adolescents, penal systems have focused on a punitive system. The adolescent offender is held accountable for his or her

actions, and rehabilitative efforts are centered on decreasing the rate of reoffending. Little consideration has been placed on how forgiveness of another could facilitate rehabilitation and reduce recidivism. Consequently, adolescent offenders frequently continue to blame others for their own wrongdoings and attempt to justify or minimize the severity of their offenses.

Assisting the juvenile offender with the process of forgiving their transgressors could have a major impact on the recidivism rate for violence among adolescents. Addressing forgiveness as a part of a comprehensive treatment plan could prove beneficial in treating adolescent offenders. It may also speak to the systemic issue that contributes to adolescent delinquency. Understanding developmental issues in the context of forgiveness could inform a highly effective intervention strategy. It may be helpful to generate treatment strategies that acknowledge the significance of narcissism, shame, and revenge. These factors may prevent the adolescent from forgiving, healing, and growing into a well-functioning individual. By demonstrating empathy for the adolescent, significant adults (e.g., therapists, teachers) can help the adolescent progress through the stages of denial, anger, bargaining, depression, and acceptance. With time, empathy, and appropriate limits, the adolescent can move beyond hostility to develop more adaptive coping skills to deal with pain and disappointment. Once the adolescent can forgive others, they may be more likely to be sorrowful for their own transgressions. The adolescent offender may then be able to seek reparative actions for his or her own behaviors and to refrain from additional aggression toward others. Such forgiveness would likely

lead to increased mental, emotional, and physical health for both victims and offenders.

Addressing early patterns of aggression against the adolescent could help the adolescent grieve the loss of childhood and provide a mirrored experience of forgiveness. Given chaotic and dysfunctional parent-child interactions that lack communication and expressions of care and concern, family therapy would be an effective mode of treatment for facilitating forgiveness. Family-based interventions need to focus on restructuring destructive patterns of communicating, facilitating positive interactions and mutual support, and teaching fair, consistent discipline and forgiveness among family members. Including social skills and conflict resolution would also help decrease externalizing behaviors related to the adolescent's anger.

Suggestions for Future Research

The implications of forgiveness are relevant to all ages. Since all people transgress at one time or another, forgiveness is necessary in all types of relationships (dyads, marriages, families, and communities). Clinical applications of forgiveness would impact issues of child abuse, domestic violence, extramarital affairs, racial injustice, and any relationship that has an offender and a victim. Moreover, the implications for this research are far reaching. Seeking and offering forgiveness can reduce conflict and hostility, resolve unfinished business, enhance interpersonal relationships, and bring mental and physical health. Future research would do well to focus on the

interaction between developmental levels of forgiveness and how people forgive.

It would also be beneficial to study the impact of forgiveness on adolescent offenders. More specifically, it would be helpful to know whether or not adolescents are capable of forgiveness, to what degree they could grant forgiveness, and whether granting forgiveness would subsequently lead to seeking forgiveness. Perhaps the forgiveness process would be more complicated for adolescents who have been wronged and who have externalized their anger and hostility. The forgiveness process requires a level of maturity in the ability to view the other as a whole, imperfect person who is capable of both good and bad. It would be helpful to study how specific failures in the forgiveness process impact the adolescent offender's subsequent behaviors.

Longitudinal studies that permit observation and assessment of the forgiveness process across ages may be fruitful in identifying developmental needs. A study of gender differences in the forgiveness process may also highlight differential needs for male and female adolescent offenders, since the nature of their offenses tends to be different.

If forgiveness education is implemented into juvenile detention centers in the treatment of adolescents, the effectiveness of such programs would need to be evaluated (e.g., in terms of the ability to develop empathy, self-esteem, guilt). Studying the impact of interpersonal relationships, self-perception, empathy,

and self-esteem on the forgiveness process could provide a new direction for conflict resolution with violent offenders.

REFERENCES

Achenbach, T. M., & Edelbrock, C. (1986). *Manual for the teacher's report form.* Burlington, VT: Department of Psychiatry, University of Vermont.

Al-Mabuk, R. H., & Enright, R. D. (1995). Forgiveness education with parentally love-deprived late adolescents. *Journal of Moral Education, 24,* 427-445. Retrieved July 13, 2000, from Academic Search Elite database.

American Psychiatric Association. (1994). *Diagnostic and statistical manual of mental disorders* (4th ed.). Washington, DC: Author.

Archer, R. L., Diaz-Loving, R., Gollwitzer, P. M., Davis, M. H., & Foushee, H. C. (1981). The role of dispositional empathy and social evaluation in the empathic mediation of helping. *Journal of Personality and Social Psychology, 40,* 786-796.

Batson, C. D., Bolen, M. H., Cross, J. A., & Neuringer-Benefiel, H. E. (1986). Where is altruism in the altruistic personality? *Journal of Personality and Social Psychology, 50,* 212-220.

Beck, A. T., Ward, C. H., Mendelson, M., Mock, J., & Erbaugh, J. (1961). An inventory for measuring depression. *Archives of General Psychiatry, 4,* 561-571.

Beyers, J. M., Loeber, R., Wikstrom, P. H., & Stouthamer-Loeber, M. (2001). What predicts adolescent violence in better-off neighborhoods? *Journal of Abnormal Child Psychology, 29,* 369-381. Retrieved March 19, 2002, from http://www.findarticles.com/cf_0/m0902/5_29/80056062/print.jhtml

Bradfield, M., & Aquino, K. (1999). The effects of blame attributions and offender likeableness on forgiveness and revenge in the workplace. *Journal of Management, 25,* 607-631. Retrieved March 7, 2002, from http://www.findarticles.com/cf_0/m4256/5_25/57590751/print.jhtml

Bushman, B. J., & Baumeister, R. F. (1998). Threatened egotism, narcissism, self-esteem, and direct and displaced aggression: Does self-love or self-hate lead to violence? *Journal of Personality and Social Psychology, 75,* 219-229. Retrieved March 20, 2002, from PsycARTICLES database.

Connell, J. P. (1985). A new multidimensional measure of children's perception of control. *Child Development, 56,* 1018-1041.

Coopersmith, S. (1981). *Self-esteem inventories.* Palo Alto, CA: Consulting Psychologists, Inc.

Davis, M. H. (1980). A multidimensional approach to individual differences in empathy. *JSAS Catalog of Selected Documents in Psychology, 10,* 85.

Ekman, P., & Friesen, W. V. (1978). *Manual for the facial action coding system.* Palo Alto, CA: Consulting Psychologist Press.

Erikson, E. (1963). Erikson, E. (1963). *Childhood and society* (2nd ed.). New York: Norton Publishers.

Exline, J. J., & Baumeister, R. F. (2000). Expressing forgiveness and repentance: Benefits and barriers. In In M. E. McCullough, K. I. Pargament, & C. E. Thoresen (Eds.), *Forgiveness: Theory, research, and practice* (pp. 133-155). New York: The Guilford Press.

Feshbach, N. D., & Lipian, M. (1987). *The Empathy Scale for Adults.* Los Angeles: University of California.

Flannery, D. J., Singer, M. I., & Wester, K. (2001). Violence exposure, psychological trauma, and suicide risk in a community sample of dangerously violent adolescents. *Journal of the American Academy of Child and Adolescent Psychiatry, 40,* 435-442. Retrieved March 19, 2002, from http://www.findarticles.com/cf_0/m2250/4_40/73278371/print.jhtml

Gold, G. J., & Weiner, B. (2000). Remorse, confession, group identity, and expectancies about repeating a transgression. *Basic and Applied Social Psychology, 22,* 291-300.

Gorsuch, R. L., & Hao, J. Y. (1993). Forgiveness: An exploratory factor analysis and its relationships to religious variables. *Review of Religious Research, 34,* 333-347.

Gorsuch, R. L., & McPherson, S. E. (1989). Intrinsic/extrinsic measurement: I/E revised and single item scales. *Journal for the Scientific Study of Religion, 28,* 348-354.

Hebl, J. H., & Enright, R. D. (1993). Forgiveness as a psychotherapeutic goal with elderly females. *Psychotherapy, 24,* 658-667.

Huang, S. T., & Enright, R. D. (2000). Forgiveness and anger-related emotions in Taiwan: Implications for therapy. *Psychotherapy, 37,* 71-79.

Hudson, W. W. (1976). Child's attitudes toward father. In C. A. Guili & W. W. Hudson (Eds.), *Assessing parent-child relationship disorders in clinical practice: The child's point of view.* Honolulu: University of Hawaii Department of Educational Psychology and School of Social Work.

Kelley, T. M., & Stack, S. A. (2000). Thought recognition, locus of control, and adolescent well-being. *Adolescence, 35,* 531-550. Retrieved March 20, 2002, from http://www.findarticles.com/cf_0/m2248/139_35/68535848/print.jhtml

Konstam, V., Chernoff, M., & Deveney, S. (2001). Toward forgiveness: The role of shame, guilt, anger, and empathy. *Counseling and Values, 46,* 26-39.

Kubler-Ross, E. (1969). *On death and dying.* New York: Macmillan.

Lamb, S. (1997). Individual and civic notions of forgiveness. Retrieved February 2, 2002, from http://www.tigger.uci.edu/~lnucci/MoralEd/aotm/forgiven.htm

Linn, M., & Linn, D. (1978). *Healing life's hurts: Healing memories through five stages of forgiveness.* New York: Paulist Press.

Lock, J. (1996). Disruptive behavioral disorders. In H. Steiner & I. D. Yalom (Eds.), *Treating adolescents* (pp. 43-76). San Francisco: Jossey-Bass, Inc.

McAuley, E., & Shaffer, S. (1993). Affective responses to externally and personally controllable attributions. *Basic and Applied Social Psychology, 14,* 475-485.

McCullough, M. E., Pargament, K. I., & Thoresen, C. E. (2000a). The frontier of forgiveness: Seven directions for psychological study and practice. In M. E. McCullough, K. I. Pargament, & C. E. Thoresen (Eds.), *Forgiveness: Theory, research, and practice* (pp. 299-320). New York: The Guilford Press.

McCullough, M. E., Pargament, K. I., & Thoresen, C. E. (2000b). The psychology of forgiveness: History, conceptual issues, and overview. In M. E. McCullough, K. I. Pargament, & C. E. Thoresen (Eds.), *Forgiveness: Theory, research, and practice* (pp. 1-14). New York: The Guilford Press.

McCullough, M. E., Rachal, K. C., Sandage, S. J., Worthington, E. L., Brown, S. W., & Hight, T. L. (1998). Interpersonal forgiving in close relationships: II. Theoretical elaboration and measurement. *Journal of Personality and Social Psychology, 75,* 1586-1603.

McCullough, M. E., Worthington, E. L., & Rachal, K. C. (1997). Interpersonal forgiving in close relationships. *Journal of Personality and Social Psychology, 73,* 321-336.

Mullet, E., Houdbine, A., Laumonier, S., & Girard, M. (1998). Forgivingness: Factor structure in a sample of young, middle-aged, and elderly adults. *European Psychologist, 3,* 289-297.

Offord, D.R. (1989). Conduct disorder: Risk factors and prevention. In D. Schaffer et al. (Eds.), *Prevention of mental disorders, alcohol, and other drugs* (pp. 273-307). Washington, DC: U.S. Department of Health and Human Services.

Piers, E. V. (1984). *Revised manual for the Piers-Harris Self Concept Scale.* Los Angeles: Western Psychological Services.

Pingleton, J. P. (1997). Why we don't forgive: A biblical and object relations theoretical model for understanding failures in the forgiveness process. *Journal of Psychology and Theology, 25,* 403-413.

Raskin, R. N., & Hall, C. S. (1979). A narcissistic personality inventory. *Psychological Reports, 45,* 590.

Rivara, F. P. (1995). Crime, violence, and injuries in children and adolescents: Common risk factors? *Criminal Behaviour and Mental Health, 5,* 367-385.

Rosenberg, M. (1965). *Society and the adolescent self-image.* Princeton, NJ: Princeton University Press.

Sandage, S. J., Worthington, E. L., Hight, T. L., & Berry, J. W. (2000). Seeking forgiveness: Theoretical context and an initial empirical study. *Journal of Psychology and Theology, 28,* 21-35.

Snyder, M. (1974). The self-monitoring of expressive behavior. *Journal of Personality and Social Psychology, 30,* 526-537.

Spanier, G. B. (1976). Measuring dyadic adjustment: New scales for assessing the quality of marriage and similar dyads. *Journal of Marriage and the Family, 38,* 15-28.

Spielberger, C. D., Gorsuch, R. L., Lushene, R., Vagg, P. R., & Jacobs, G. A. (1983). *State-Trait Anxiety Inventory (Form V): Self-evaluation questionnaire.* Palo Alto, CA: Consulting Psychologists Press.

Stanley, S. M., & Markman, H. J. (1992). Assessing commitment in personal relationships. *Journal of Marriage and the Family, 54,* 595-608.

Steiner, H., & Feldman, S. S. (1996). General principles and special problems. In H. Steiner & I. D. Yalom (Eds.), *Treating adolescents* (pp. 1-43). San Francisco: Jossey-Bass, Inc.

Steiner, H., Cauffman, E., & Duxbury, E. (1999). Personality traits in juvenile delinquents: Relation to criminal behavior and recidivism. *Journal of the American Academy of Child and Adolescent Psychiatry, 38,* 256-262. Retrieved March 7, 2002, from http://www.findarticles.com/cf_0/m2250/3_38/54171863/print.jhtml

Strayhorn, J. S., Weidman, C. S., & Larson, D. B. (1990). A measure of religiousness and its relationship to child and parent mental health variables. *Journal of Community Psychology, 18,* 98-106.

Subkoviak, M. J., Enright, R. D., Wu, C., Gassin, E. A., Freedman, S., Olson, L. M., et al. (1995). Measuring interpersonal forgiveness in late adolescence and middle adulthood. *Journal of Adolescence, 18,* 641-655.

Swenson, C. C., & Kennedy, W. A. (1995). Perceived control and treatment outcome with chronic adolescent offenders. *Adolescence, 30,* 565-578. Retrieved March 20, 2002, from http://library.northernlight.com/LW19970922070163928.html

Takaku, S. (2001). The effects of apology and perspective-taking on interpersonal forgiveness: A dissonance-attribution model of interpersonal forgiveness. *The Journal of Social Psychology, 141,* 494-508. Retrieved March 10, 2002, from http://library.northernlight.com/UU20011016050007632.html

Tangney, J. P. (1991). Moral affect: The good, the bad, and the ugly. *Journal of Personality and Social Psychology, 61,* 598-607.

Tangney, J. P., & Feshbach, S. (1988). Children's television-viewing frequency: Individual differences and demographic correlates. *Personality and Social Psychology, 14,* 148-158.

Trainer, M. F. (1981). *Forgiveness: Intrinsic, role-expected, expedient, in the context of divorce.* (Unpublished Doctoral dissertation, Boston University, 1981). *Disseration Abstracts International, 45* (04), 1325B.

Wade, S. H. (1989). The development of a scale to measure forgiveness. (Doctoral dissertation, Fuller Theological Seminary, School of Psychology, 1989). *Dissertation Abstracts International, 50* (11), 5338B.

Weiner, B., Graham, S., Peter, O., & Zmuidinas, M. (1991). Public confession and forgiveness. *Journal of Personality, 59,* 279-312.

Widom, C. S. (1989, April 14). The cycle of violence. *Science, 244,* 160-167.

VITA

NAME:

Stephanie Lau Pelayo

EDUCATION:

Rosemead School of Psychology Clinical Psychology	Psy.D.	(Cand.)
Rosemead School of Psychology Clinical Psychology	M.A.	1999
University of California, Irvine Psychology and Social Behavior	B.A.	1997

INTERNSHIP:

USC Children's Hospital Los Angeles	2001 –	2002

PRACTICA:

Harbor-UCLA Medical Center Cognitive Behavioral Therapy Clinic	2000 –	2001
Southern Youth Correctional Reception Center and Clinic Residential Treatment Program	1999 –	2000
Garden Grove Unified School District School Psychology	1998 –	1999
Biola Counseling Center Outpatient Program		1998

EMPLOYMENT:

Orangewood Children's Foundation Supervisor	1996 –	2000
Child Abuse Services Team Child Advocate		1997

U.S. Department of Education
Office of Educational Research and Improvement (OERI)
National Library of Education (NLE)
Educational Resources Information Center (ERIC)

REPRODUCTION RELEASE

(Specific Document)

I. DOCUMENT IDENTIFICATION:

Title: Forgiveness: Theory, Research and Clinical Implications for Adolescent Offenders

Author(s): Stephanie Lau Pelayo

Corporate Source: Biola University

Publication Date: August 2002

II. REPRODUCTION RELEASE:

In order to disseminate as widely as possible timely and significant materials of interest to the educational community, documents announced in the monthly abstract journal of the ERIC system, *Resources in Education* (RIE), are usually made available to users in microfiche, reproduced paper copy, and electronic media, and sold through the ERIC Document Reproduction Service (EDRS). Credit is given to the source of each document, and, if reproduction release is granted, one of the following notices is affixed to the document.

If permission is granted to reproduce and disseminate the identified document, please CHECK ONE of the following three options and sign at the bottom of the page.

The sample sticker shown below will be affixed to all Level 1 documents

PERMISSION TO REPRODUCE AND DISSEMINATE THIS MATERIAL HAS BEEN GRANTED BY

Sample

TO THE EDUCATIONAL RESOURCES INFORMATION CENTER (ERIC)

1

Level 1

☐

Check here for Level 1 release, permitting reproduction and dissemination in microfiche or other ERIC archival media (e.g., electronic) *and* paper copy.

The sample sticker shown below will be affixed to all Level 2A documents

PERMISSION TO REPRODUCE AND DISSEMINATE THIS MATERIAL IN MICROFICHE, AND IN ELECTRONIC MEDIA FOR ERIC COLLECTION SUBSCRIBERS ONLY, HAS BEEN GRANTED BY

Sample

TO THE EDUCATIONAL RESOURCES INFORMATION CENTER (ERIC)

2A

Level 2A

☒

Check here for Level 2A release, permitting reproduction and dissemination in microfiche and in electronic media for ERIC archival collection subscribers only

The sample sticker shown below will be affixed to all Level 2B documents

PERMISSION TO REPRODUCE AND DISSEMINATE THIS MATERIAL IN MICROFICHE ONLY HAS BEEN GRANTED BY

Sample

TO THE EDUCATIONAL RESOURCES INFORMATION CENTER (ERIC)

2B

Level 2B

☐

Check here for Level 2B release, permitting reproduction and dissemination in microfiche only

Documents will be processed as indicated provided reproduction quality permits.
If permission to reproduce is granted, but no box is checked, documents will be processed at Level 1.

I hereby grant to the Educational Resources Information Center (ERIC) nonexclusive permission to reproduce and disseminate this document as indicated above. Reproduction from the ERIC microfiche or electronic media by persons other than ERIC employees and its system contractors requires permission from the copyright holder. Exception is made for non-profit reproduction by libraries and other service agencies to satisfy information needs of educators in response to discrete inquiries.

Sign here, → please

Signature: Stephanie Lau Pelayo

Printed Name/Position/Title:

Organization/Address: 4330 Golden Glen Dr. Chino Hills, CA 91709

Telephone: 909-393-3396 FAX:

E-Mail Address: spelayo@msn.com Date: 5/24/02

(over)

III. DOCUMENT AVAILABILITY INFORMATION (FROM NON-ERIC SOURCE):

If permission to reproduce is not granted to ERIC, *or*, if you wish ERIC to cite the availability of the document from another source, please provide the following information regarding the availability of the document. (ERIC will not announce a document unless it is publicly available, and a dependable source can be specified. Contributors should also be aware that ERIC selection criteria are significantly more stringent for documents that cannot be made available through EDRS.)

Publisher/Distributor:
Address:
Price:

IV. REFERRAL OF ERIC TO COPYRIGHT/REPRODUCTION RIGHTS HOLDER:

If the right to grant this reproduction release is held by someone other than the addressee, please provide the appropriate name and address:

Name:
Address:

V. WHERE TO SEND THIS FORM:

Send this form to the following ERIC Clearinghouse:

However, if solicited by the ERIC Facility, or if making an unsolicited contribution to ERIC, return this form (and the document being contributed) to:

ERIC Processing and Reference Facility
4483-A Forbes Boulevard
Lanham, Maryland 20706

Telephone: 301-552-4200
Toll Free: 800-799-3742
FAX: 301-552-4700
e-mail: info@ericfac.piccard.csc.com
WWW: http://ericfacility.org